



LOS ANGELES COUNTY COMMISSION ON HIV

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EXECUTIVE COMMITTEE MEETING MINUTES September 22, 2014

Approved
9/27/2015

MEMBERS PRESENT	MEMBERS ABSENT	PUBLIC	COMM STAFF/ CONSULTANTS
Ricky Rosales, Co-Chair	Michael Johnson, Esq, <i>Co-Chair</i>	Kevin Donnelly	Jane Nachazel
Al Ballesteros, MBA	Joseph Green	Erik Sanjurjo	Yeghishe Nazinyan, MS, MD
Aaron Fox, MPM	Bradley Land	Kevin Stalter	Craig Vincent-Jones, MHA
Grissel Granados, MSW	Fariba Younai, DDS		
AJ King, MPH			
Ted Liso			DHSP STAFF
Mario Pérez, MPH			None
Jill Rotenberg			
Terry Smith, MPA			
Richard Zaldivar			

CONTENTS OF COMMITTEE PACKET

- 1) **Agenda:** Executive Committee Meeting Agenda, 9/22/2014
- 2) **Request:** Latino outreach suggestions: Coordination with Alianza, Mr. Pérez report at Commission meeting of 8/14/2014; Coordination with Patricio Sosa support group, José Munoz letter of 9/18/2014, 9/22/2014
- 3) **Proposed Agenda:** Commission on HIV Annual Meeting Agenda, 10/30/2014, 9/22/2014
- 4) **Spreadsheet:** Commission FY 2014-2015 Operating Budget, 9/22/2014
- 5) **Grievance:** Michael Pitkin, 9/22/2014
- 6) **Policy/Procedure:** Commission on HIV Continuum of Care Grievance Process, 3/15/2012
- 7) **Application:** Commission Membership Application, 9/22/2014

1. **CALL TO ORDER:** Mr. Rosales called the meeting to order at 2:05 pm.
2. **APPROVAL OF AGENDA:**
MOTION #1: Approve the Agenda Order (*Passed by Consensus*).
3. **APPROVAL OF MEETING MINUTES:** This item was postponed.
4. **PUBLIC COMMENT (Non-Agendized or Follow-Up):** There were no comments.
5. **COMMITTEE COMMENT (Non-Agendized or Follow-Up):** ➡ Mr. Vincent-Jones will use the work plan framework to summarize each meeting's actions in advancing goals and forward it to Executive as a brief meeting summary prior to minutes presentation.
6. **DIVISION OF HIV/STD PROGRAMS (DHSP) REPORT:** Mr. Pérez deferred his report to spend his limited time on the budget.
7. **CO-CHAIRS' REPORT:**
 - A. **Commission Meeting Follow-up:**
 - 1) **Latino Caucus:**

- Mr. Rosales noted several recommendations including associations with Alianza and Patricio Sosa's support group as well as requests for a Spanish-language and a people of color caucus. Mr. Liso added José Muñoz supported a Spanish-language group as he was often asked to translate. Mr. Vincent-Jones said Commission offices could host.
- Mr. Zaldivar supported a people of color caucus including Latinos and African-, Native- and Asian Americans. Perspectives would differ, but issues are similar. He did not see enthusiasm in the Latino community sufficient to support a solely Latino caucus primarily due to an historical lack of empowerment which deters engagement.
- Mr. Fox felt Mr. Muñoz's suggestion for Mr. Sosa's group to be an ad hoc Commission group was not part of the Commission's mission, but the LA LGBT Center might host. Appropriateness should be considered as well as need for a Spanish-language group. Mr. Vincent-Jones noted Spanish-speaking staff support would be an issue.
- Mr. Pérez said Alejandra Aguilar spoke to him at the Women's HIV Task Force's 8th Annual HIV Treatment Summit and requested support in re-invigorating Alianza. He suggested a possible joint effort with the Commission.
- Overall, he felt caucuses most effective when formed to address a specific issue rather than forming without a defined purpose. People of color and youth do face health disparity and access issues, but Mr. King felt the Commission as a whole should address disparity and access issues rather than splintering into multiple caucuses.
- Mr. Vincent-Jones said part of the purpose of caucuses, e.g., the Consumer and Transgender Caucuses, has been to offer a safe space for members to talk about issues related to the Commission. The Latino Caucus was formed three years ago due to concern about Latino Task Force recommendations. That energy has since waned so Latinos may no longer need that space. The Commission is approximately two members under its Latino demographics goal. It is the only population under-represented so membership outreach may be the most pertinent focus.
- Mr. Pérez felt Dr. Lilia Espinoza, Latino Caucus Co-Chair, had more perspectives than those she shared at the Commission. Mr. Vincent-Jones replied Dr. Espinoza felt her strength was in logistics, not community outreach, and Sergio Avina, the other Co-Chair, was not active enough in outreach.
- Dr. Espinoza would prefer to be relieved of her Co-Chair role. She no longer lives or works in the County. That is not a requirement for her seat, but made it difficult to do community organizing while, on the other hand, she has been active in evaluation work. Mr. Avina wanted to maintain his Co-Chair role after leaving the Commission, but his engagement has been an issue. A Co-Chair need not be a Commission member, but should be engaged.
- ➡ Mr. Fox will speak with Mr. Muñoz about the possibility of the LA LGBT Center hosting Mr. Sosa's group
- ➡ Staff will contact Ms. Aguilar for an update on activities pertaining to re-invigoration of Alianza and report back.
- ➡ Mr. Vincent-Jones will advise Mr. Avina and Dr. Espinoza that the Executive Committee recommends placing a motion on the next Commission agenda to vacate both Latino Caucus Co-Chair seats.

2) Biomedical Intervention Implementation:

- Mr. Fox said consensus seems to have developed among consumers, providers, the community and the County that biomedical interventions should be implemented promptly despite outside factor impediments. Public Policy proposes drafting a resolution for Commission approval which expresses the Commission's belief that the community has a responsibility to ensure as timely and effective an HIV response as possible despite any barriers.
- The resolution would be the first strategy step followed by advocacy with Board Offices to explain why biomedical interventions are important and should be implemented quickly including the need to streamline the often cumbersome procurement process. Public Policy recommended advocacy by a broad coalition of community organizations with Commission members participating as part of the coalition.
- Mr. Ballesteros recommended putting the issue on the Health Deputies agenda prior to going to Board Offices.
- Mr. Vincent-Jones said the motion for the resolution should include next steps to ensure forward movement.
- Mr. Smith recommended identifying implementation of PrEP as a public health emergency, but Mr. Pérez said that phrase triggers activities that may be undesirable, e.g., County Code requirements that can include quarantines. "Public health crisis" expresses urgency without triggering specific legal requirements.
- Mr. Pérez said the Commission clearly wanted DHSP to implement PrEP quickly. No one wanted a 15-month procurement process, but DHSP also wanted to be transparent about RFPs in progress to address other crises, e.g., among young, Africa-American and Latino, gay men; transgenders; and STD disparities in South Los Angeles. Issues outside the public health focus also require time and attention pulling DHSP in multiple directions.
- The Commission was encouraged and empowered to express its public health and HIV-specific recommendations to the Health Deputies. They will then have questions for DHSP to which DHSP will respond.
- Mr. Vincent-Jones added the next Planning, Priorities and Allocations (PP&A) Committee will address savings and can also discuss PrEP funding options, but Mr. Ballesteros felt more information was needed to discuss funding.

- Mr. Pérez noted DHSP reviewed a funding surplus at the last PP&A meeting and offered recommendations for its use some of which were endorsed at the last Commission meeting. Approximately two dozen ideas were also identified at the PP&A meeting for possible allocation in FY 2015. He understood ideas would be condensed and clarified with their rationale prior to a discussion on capacity and procurement to maximize the 5% carry-over in Part A formula funds and MAI carry-over funds endorsed at the Commission.
- ➡ Public Policy will work on resolution language at its 9/24/2014 meeting. Interested parties are welcome to attend or can email suggestions to Messrs. Fox, Zaldivar and Vincent-Jones.
- ➡ Mr. Vincent-Jones will complete the list of ideas from PP&A for FY 2015 allocations and categorize them for ease of review. He will forward the completed list to PP&A in the next few days for review. He will also send the list to DHSP for review and comment prior to the next PP&A meeting.

3) Accessing Health Plans/OA-HIPP:

- Mr. Rosales reported there was a 9/19/2014 call with the Office of AIDS (OA), DHSP and others regarding consumer issues. Mr. Pérez reported he, Mr. Vincent-Jones, Dr. Karen Mark and Niki Dhillon participated. The emphasis was on the need for state leadership irrespective of which department(s) were involved.
- Attendees committed to clarify a list of problem areas with examples for further discussion. OA committed to developing a FAQ sheet. They will also develop an informational letter regarding OA-HIPP eligibility to all clients, not only current ADAP clients, and will review the letter with advocates prior to distribution.
- OA will review actions to date at a 9/26/2014, 2:00 to 4:00 pm, follow-up call and hear reports on issues from consumers, policy advisors and Benefit Specialists. Mr. Stalter noted nothing is computerized. Applications are faxed, often lost and moved among different staff over time. Mr. Fox said losing an application is a HIPPA violation.
- ➡ Staff will distribute a notice of the 9/26/2014 OA call including to Benefit Specialists per a list DHSP will provide. Staff will also forward emails received and a report of Commission discussion on the subject to OA.
- ➡ The local site for the 9/26/2014 OA call will be the Commission office conference room which seats no more than 40 people. Interested parties should RSVP to the Commission staff.

B. Comprehensive HIV Planning (CHP) Task Force: There was nothing additional to report at this time.

8. EXECUTIVE DIRECTOR'S REPORT:

- Mr. Vincent-Jones introduced Dr. Nazinyan, the Commission's new staff epidemiologist. His primary work now will be on the Los Angeles Coordinated HIV Needs Assessment (LACHNA) with Dr. Amy Wohl on methodology and analysis. He will also be assisting PP&A as needed. Due to his work, he will spend most of his time at DHSP.
- Dr. Nazinyan was previously with the Maternal, Child and Health Department where he addressed population-based research on newborns and new mothers. Prior to that he coordinated a large HIV grant for Global Fund.

A. Commission FY 2014-2015 Operating Budget:

- Mr. Vincent-Jones noted there are now five funding streams: a portion of the Department of Public Health's (DPH) Net County Cost (NCC) allocation to pay for items disallowed by RW, e.g., consumer stipends, out of town travel and Public Policy support; CDC Comprehensive Agreement; Ryan White (RW) Part A Service, Information/Referral (planned for January 2015); HOPWA SPNS Grant; and RW Part A, administrative.
- The Commission was selected for Information/Referral as it offers a consumer connection, but no provider conflict of interest. AIDS Project Los Angeles previously produced the HIV LA Resource Directory to meet service goals. It identified updating provider changes as the hardest aspect so the Commission is exploring other models.
- Staffing was slightly less than projected. Estimates were based on the high range of Executive Office estimates.
- Local Travel reflects staff reimbursements while local Commission member reimbursement was listed under Contractual. Both Local and Out of Town Travel was based on historical figures. The latter includes \$10,000 for the United States Conference on AIDS and two other meetings plus \$5,000 for travel related to the HOPWA grant.
- Supplies has slightly increased to support the new Information/Referral service and overall increased supply costs. Mr. Vincent-Jones noted if both RW and CDC have a need then he allocates 60% to RW as it has more requirements.
- Equipment Rental/Lease/Maintenance reflects a new copier which was the highest capacity below industrial size. The Commission's usage is not quite industrial, but higher than for most other copiers. The new machines will improve reliability. Tablets and iPads were not in the budget because the Executive Office has not yet approved them. They were expected to cost approximately \$4,000. The budget will need to be adjusted once approval was received.
- Printing/Duplication has increased mainly due to expected costs associated with the new Information/Referral service.
- The Commission has not yet received its lease increase so the amount was estimated at approximately \$100,000.

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- Furniture was listed under RW because that has been its primary use. The estimate was a minimal \$1,000.
- Parking has remained fairly stable though it may go up slightly due to HOPWA SPNS grant planning.
- Meeting Room Rental was mainly charged to RW and the CDC for routine meetings. HOPWA and NCC were charged 7%, \$2,000, for HOPWA grant meetings and Public Policy forums on Medi-Cal and Covered California respectively.
- Telecommunications was increased to accommodate phone system changes for Information/Referral.
- Approximately half of IT Equipment costs were routine with the rest for improvements, e.g., an LCD projector.
- Audio Visual costs were primarily routine, but have increased due to recordings of colloquia.
- Regarding contractual costs, Data Collection was primarily LACHNA which has been subcontracted to DHSP with Dr. Nazinyan representing the Commission. PLWH are the main focus this year, but next year will focus on HIV- people.
- Needs Assessment (NA) addresses work beyond LACHNA. Emily Gantz McKay provided unmet needs HRSA Technical Assistance and may be engaged for more unmet need plus unaware work. A Native American NA may also be done. HIV and STD rates are spiking, but data is sparse. The County has the largest US Native American population.
- Public Awareness primarily pertains to Information/Referral services. RW also supports dissemination of information about services including availability and the CDC supports community engagement.
- HIV Housing Planning pertains to a purchase order for a consultant for two years charged to the HOPWA SPNS grant.
- Standards of Care supports professionals to facilitate developing/revising standards, e.g., to incorporate prevention.
- Copy-Editing supports completion of the current standards for a baseline. \$10,000 of the Graphic Design charges support completing the standards with the other \$30,000 split between Information/Referral and routine usage.
- Translation/Interpretation supports services for meetings. The Commission also was requiring the new Administrative Assistant III to be at the highest bilingual English/Spanish level and has expressed a preference for the Senior Secretary to be bilingual as well. Those staff will allow the Commission to address document translation needs in-house.
- Website Development supports reconstruction for greater accessibility especially in offering new provider information as part of Information/Referral. Internal Services Department costs are higher, but they meet County requirements.
- Commissioner Reimbursement supports mileage and related expenses under RW. Consumer stipends are under NCC.
- Evaluation supports the Assessment of the Administrative Mechanism (AAM) required by RW. The \$35,000 estimate will accommodate any problems, but the AAM will be bid out at a lower amount so savings may be realized.
- Curriculum Development will support a purchase order to hire a Benefit Specialty firm to develop training and curriculum for Information/Referral staff as well as a component for paid consumer volunteers.
- Comprehensive Training is a general category for consultants, e.g., to facilitate meetings such as the Annual Meeting.
- The expense for the Parliamentarian was divided between RW and CDC as he supports both.
- The Commission had an agreement with DHSP to receive 3% of the RW award for administrative operational costs until this year. He felt it should also include 3% of NCC as previously the costs were under RW. The Commission pays 17% of the subtotal to the Executive Office for indirect costs such as personnel. While he felt it should be lower, most pay 30%.
- Mr. Pérez said obviously this is a transition. DHSP has asked the Commission to assume primary responsibility for RW Part A which includes multiple Conditions of Award. DHSP has also asked the County to integrate prevention which should result in some efficiencies. Historically, the Commission relied on approximately 3%, \$1 million, of the RW Part A award. Some efficiencies will take time, but this budget still seems high at \$1,982,638. He wanted to ensure a realistic approach, e.g., he questioned the number of Purchase Orders (POs) in light of procurement issues.
- Mr. Vincent-Jones said RW and NCC still total under 3%. He was unsure about the CDC amount as the Commission does not allocate staff for CDC. Part of the argument for integration was cost efficiencies, but he did not expect them in the first, transition year, e.g., 120-day retiree staff will be temporary. Deducting \$300,000 is for Information/Referral and \$200,000 for the HOPWA SPNS grant expenses leaves a budget of approximately \$1.4 million. He noted he has cut proposed POs by approximately half, but many are inter-related. The Commission also uses a different, faster process.
- Mr. Pérez appreciated that this budget breaks out various funding streams, but his most urgent need was to negotiate and submit to HRSA a RW YR 24 budget from 3/12/2014 to 2/28/2015 by 9/25/2014. HRSA expects the budget to address the Technical Assistance provided. The Project Officer also said HRSA was aware the Commission was now integrated and wanted a full budget reflecting that. The budget for HRSA must be negotiated in the next 72 hours.
- HRSA also wants to ensure it is only paying its proper share of expenses continuing a trend toward greater scrutiny. For example, it previously supported Public Policy Committee activities, but now disallows those expenses.
- Separately, a July-June budget is needed to reimburse the Executive Office for Commission-related duties. He also needs to be able to speak to Commission activities pertaining to the CDC prevention focus and the RW focus.

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- Mr. Vincent-Jones noted this was a new process for the Commission. Previously only line items were submitted. The RW Part A award was also late and information on some areas such as Information/Referral was not available. The Executive Office had told him the Commission could submit its budget for the supplemental September deadline.
- ➡ Mr. Vincent-Jones will correct the Graphic Design total to \$40,000.
- ➡ Mr. Vincent-Jones noted Information/Referral expenses were too high so will need to be reduced or shifted.
- ➡ Mr. Vincent-Jones will review all figures to ensure they reflect the shift from a March-February to July-June Fiscal Year.
- ➡ Mr. Vincent-Jones will meet with Kyle Baker and Dave Young to finalize a YR 24 3/1/2014 to 2/28/2015 Annual Operating Budget for Mr. Pérez to submit to HRSA. He will discuss the CDC funding level with Messrs. Baker and Young.
- ➡ Agreed to postpone budget approval until it was finalized.

MOTION #2: Approve the Commission's Operating Budget for FY 2014-2015, as presented and/or revised (**Postponed**).

B. FY 2014-2015 Staffing Plan: There was no report.

C. Grievance(s):

- Mr. Vincent-Jones presented Michael Pitkin's grievance. He noted the Commission's Policy/Procedure begins with the Executive Director identifying whether or not the grievance is valid, i.e., appropriate for the Commission to consider. The Executive Committee serves as the Grievance Committee. If a grievance is not valid, the Executive Director signs the grievance form and files it. Grievances pertinent to DHSP are referred to DHSP within five business days.
- Valid or unclear grievances are addressed by both parties presenting their perspectives at the Executive Committee.
- Mr. Pitkin's statements concerning legal costs are not valid because the Commission does not have purview. References to grant funds transferred from services to legal costs was inaccurate and therefore not valid.
- Mr. Vincent-Jones was not sure whether or not Mr. Pitkin's concerns pertaining to funds for housing were valid.
- There was consensus that Mr. Pitkin did not understand the process of shifting funds to maximize them and the grievance was not valid. It did, however, provide a teachable moment for outreach.
- ➡ Mr. Vincent-Jones will call Mr. Pitkin to offer education on the funding maximization process and Commission purview.

D. HOPWA SPNS Grant: There was no report.

E. Upcoming Commission Meeting(s)/Agendas: The 10/9/2014 Commission meeting will include: a Transgender Colloquium with speaker and panel; PEP/PrEP resolution, Public Policy; and unmet need update based on Emily Gantz McKay's work.

9. STANDING COMMITTEE REPORTS:

A. Operations Committee:

1) Membership Renewals/Open Nominations:

- Mr. Vincent-Jones presented a new combined application for new and renewal candidates which included some additional information. Candidates who applied using the prior application need not fill out the new one.
- The application will be distributed with a cover letter which includes a request for Commission members who wish to renew to advise staff to facilitate developing an interview schedule. Interviews will be by teams of three or four.

B. Standards and Best Practices (SBP) Committee: There was no report.

C. Public Policy Committee: There was no report.

D. Planning, Priorities and Allocations (PP&A) Committee: There was no report.

10. CAUCUS REPORTS:

- The Consumer Caucus elected Sabel Samone-Loreca as a Co-Chair along with Messrs. Land and Liso.
- Discussion topics at the last meeting included OA-HIPP and a possible group for Spanish-speaking consumers.

11. NEXT STEPS: There was no additional discussion.

12. ANNOUNCEMENTS: There were no announcements.

14. ADJOURNMENT: The meeting adjourned at 4:05 pm.